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UTILITY	Attorney Docket No.	RPS6017C2 Richard Yarwood				
PATENT APPLICATION TRANSMITTAL	First Inventor					
	Title PROCESS FOR	PROCESS FOR PREPARING SOLID DOSAGE FORMS  Title FOR				

Only for new nonprovision	nal application	s under 37 CFR 1.53(b)	) $E$	xpress l	Mail Label No.	JEV2949	96812	22US
APPLICATION ELEMENTS			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application					
See MPEP chapter 600 cond			πts.		· · · · · · · · · · · · · · · · · · ·	Washington		<del></del>
1. Fee Transmittal F				7.	CD-ROM or CD			e table or 🙀 🛱
Applicant claims s		-		O Misselm	Computer Prog			Nub-mineio-
2. See 37 CFR 1.27					otide and/or Ami		ience S	Submission V
3. Specification (preferred arrangement		Pages 23		a	Computer Re		(CRF)	=
- Descriptive title				b. Sp	ecification Seque	ence Listing o	on:	Š
<ul> <li>Cross Reference</li> <li>Statement Reg</li> </ul>					i ☐ CD-RO	OM or CD-R	2 conie	es): or
- Reference to se	•							,,
or a computer p	program listing			_	ii.∐ paper			
- Background of		_		c. Statements verifying identity of above copies				
<ul> <li>Brief Summary</li> <li>Brief Description</li> </ul>				A	CCOMPANYI	NG APPLI	CATIO	ON PARTS
- Detailed Descri				9.	Assignment Pa	apers (cover	sheet 8	document(s))
- Claim(s)					37 CFR 3.73(t	•		7 Power of
- Abstract of the	Disclosure			10.	(when there is		) L	Attorney
4. Drawing(s) (35 U.S.C. 113) [ Total Sheets ]		١,	11. English Translation Document (if applicable)					
		i .	12. Information Disclosure Copies of IDS					
5. Oath or Declaration	l	Total Pages 3	] ]		Statement (ID	-	,	니 Citations
a. Newly exec	uted (original o	or copy)		13.	Preliminary A			
b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)			14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
i. DELETION OF INVENTOR(S)				15. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR			Nonnublication Posturet under 25 LLC C 122					
	and 1.33(b).			16.				form PTO/SB/35
				1 _	or its equivale	ent.		
6 Application Data Sheet. See 37 CFR 1.76				17. Other:				
18. If a CONTINUING APPLI			supply t	the requis	ite information be	elow and in a	prelimi	nary amendment,
or in an Application Data She	eet under 37 C	FR 1.76:				00 55	4 204	
✔ Continuation	Divisional	Continuation-in-part (		of	prior application No.:_	09 , 55	1,301	·
Prior application information:	Examiner	Shelley A. Dods	son		Group Art	Unit: 1616		
For CONTINUATION OR DIVIS								
Box 5b, is considered a part of The incorporation can only be								rated by reference.
		19. CORRESPO	NDENC	E ADDR	ESS			
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Customer Number or Bar C	OGB LADEI	(Insert Customer No. or Atta	ch bar cod	le label here)		Correspo	inuerice a	udress below
Name	Donald O. Nickey							
	Cardinal Health, Inc.							
Address	7000 Cardinal Place							
City	Dublin State Ohio Zip Code				43017			
				Cilio			1,0011	
Country	United St	ates	Teleph	one (	614-757-554	+2   F	ах	614-757-2243
Name (Print/Type)	Donald O	Donald O. Nickey Regist			Registration No. (Attorney/Agent) 29,092			
Signature	Consid 01 inter Date 08/05/2003				05/2003			
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## Complete if Known FEE TRANSMITTAL Application Number Filing Date August 5, 2003 for FY 2003 Richard Yarwood First Named Inv ntor Effective 01/01/2003. Patent fees are subject to annual revision. **Examiner Name** Shelley Dodson Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1616 (4) 750 00 TOTAL AMOUNT OF DAVMENT

TOTAL AIR	OUT OF FATHER	(\$) 750.00		Attorr	ey Do	cket N	10. JRPS6017C2	
METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued)								
Check Credit card Money Other None 3. ADDITIONAL FEES				S				
	Order L		<u>Large</u>	Entity	Small	Entity	•	
Deposit /	Account:		Fee	Fee		Fee	Fee Description	
Deposit Account	50-0256		Code	•••	Code	• •		Fee Paid
Number Deposit			1051	130	2051		Surcharge - late filing fee or oath	
Account Name	Cardinal Health, Inc.		1052	50	2052		Surcharge - late provisional filing fee or cover sheet	
The Director is authorized to: (check all that apply)		1053	130	1053		Non-English specification		
Charge fee(s) indicated below Credit any overpayments		1812	2,520	1812		For filing a request for ex parte reexamination		
Charge any	additional fee(s) during the pende	ency of this application	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee	(s) indicated below, except for the	e filing fee	1805	1,840*	1805	1,840*		•
to the above-id	entified deposit account.						Examiner action	
	FEE CALCULATION		1251	110	2251	55	Extension for reply within first month	
1. BASIÇ FI	ILING FEE		1252	410	2252	205	Extension for reply within second month	
	Small Entity	For Dold	1253	930	2253	465	Extension for reply within third month	
Fee Fee Code (\$)	Fee Fee Fee Description Code (\$)	Fee Paid	1254	1,450	2254	725	Extension for reply within fourth month	
	2001 375 Utility filing fee	(750 00 )	1255	1,970	2255	985	Extension for reply within fifth month	
1002 330	2002 165 Design filing fee	750.00	1401	320	2401	160	Notice of Appeal	
1003 520	2003 260 Plant filing fee		1402	320	2402	160	Filing a brief in support of an appeal	
1004 750	2004 375 Reissue filing fe	,	1403	280	2403	140	Request for oral hearing	
1005 160	2005 80 Provisional filing	<del></del>	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
			1452	110	2452		Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 750.00		1453	1.300	2453	650	Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			1.300	2501		Utility issue fee (or reissue)		
	Ext <u>ra Claim</u> s	Fee from Fee Paid	1502	470	2502		Design issue fee	
Total Claims	16 -20** = X	= 0.00	1503	630	2503		5 Plant issue fee	
Independent Claims	2 -3** = X	=(0.00	1460	130	1460	130	Petitions to the Commissioner	
Multiple Deper	ndent		1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Large Entity			1806	180	1806	3 180	Submission of Information Disclosure Stmt	
Fee Fee Code (\$)	Fee Fee <u>Fee Descrip</u> Code (\$)	<del></del>	8021	40	8021	1 40	Recording each patent assignment per property (times number of properties)	
1202 18	2202 9 Claims in exces	s of 20	1809	750	2809	375	Filing a submission after final rejection	
1201 84		ims in excess of 3					(37 ČFR 1.129(a))	
1203 280		lent claim, if not paid	1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1204 84 2204 42 ** Reissue independent claims over original patent			1801	750	2801	375	Request for Continued Examination (RCE)	1
1205 18	2205 9 ** Reissue clair and over origi	ns in excess of 20 nal patent	1802	900	1802	900	Request for expedited examination of a design application	
	QUIDTOTAL (2)	(\$) 0.00	Other fee (specify)					
**or number	**or number previously paid, if greater, For Reissues, see above **Reduced by Başic Filing Fee Paid SUBTOTAL (3) (\$) 0.00							

SUBMITTED BY (Complete (if applicable) Registration No. Donald O. Nickey Name (Print/Type) 29,092 Telephone 614-757-5542 (Attorney/Agent) Date August 5, 2003 Signature

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